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CONFIRMATION NO. 1196

<b>SERIAL NUMBER</b> 10/657,327	<b>FILING DATE</b> 09/08/2003  <b>RULE</b>	<b>CLASS</b> 128	<b>GROUP ART UNIT</b> 3764	<b>ATTORNEY DOCKET NO.</b> 35739.CIP
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**APPLICANTS**

Christopher Zacco, Ocala, FL;

**\*\* CONTINUING DATA** *OK M.B.* \*\*\*\*\*

This application is a CIP of 10/289,588 11/07/2002 PAT 6,619,290  
 and claims benefit of 60/439,327 01/10/2003  
 and claims benefit of 60/463,417 04/16/2003

**\*\* FOREIGN APPLICATIONS** *None M.B.* \*\*\*\*\*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***  
**\*\* 11/29/2003**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>AB</i> <i>M.B.</i> Examiner's Signature Initials	<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 8
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**TITLE**  
 Mouthpiece for reducing snoring

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